

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

SECRETARY OF THE SENATE

09 OCT 20 AM 11:41

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines 12FE4M5

Lautenberg for Senate

ADDRESS (number and street) 196 West State Street

(Check if address is changed) Trenton NJ 08608 CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) pnichols@njdems.org

COMMITTEE'S WEB PAGE ADDRESS (URL) www.lautenbergfornj.com

2. DATE 10 / 15 / 2009

3. FEC IDENTIFICATION NUMBER C C00382457

4. IS THIS STATEMENT NEW (N) OR AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer Peter D Nichols

Signature of Treasurer [Signature] Date 10 / 15 / 2009

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

29020412831

5. TYPE OF COMMITTEE (Check One)

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate Frank Lautenberg

Candidate Party Affiliation DEM Office Sought: House Senate President State NJ District 00

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a _____ (National, State (or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative
- (f) In addition, this committee is a Lobbyist/Registrant PAC.
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	_____	FEC ID number	IC _____
2.	_____	FEC ID number	IC _____
3.	_____	FEC ID number	C _____
4.	_____	FEC ID number	IC _____

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Write or Type Committee Name

Lautenberg for Senate

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address, (phone number – optional), and position of the person in possession of Committee books and records.

Full Name

Peter D Nichols

Mailing Address

196 West State Street

Trenton

NJ

08608

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Treasurer/CFO

Telephone number **609** - **392** - **3367**

8. Treasurer: List the name and address (phone number – optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

Peter D Nichols

Mailing Address

196 West State Street

Trenton

NJ

08608

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Treasurer/CFO

Telephone number **609** - **392** - **3367**

29020412833

Full Name of Designated Agent

Peter D Nichols

Mailing Address

196 West State Street

Trenton

NJ

08608

Title or Position

CITY

STATE

ZIP CODE

Treasurer/CFO

Telephone number

609

392

3367

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Bank of America

Mailing Address

One Fleet Way

Scranton

PA

18507

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

TD Bank

Mailing Address

1100 Lake Street

Ramsey

NJ

07446

CITY

STATE

ZIP CODE

29020412834

FOR PICKUP CALL 1-800-222-1811

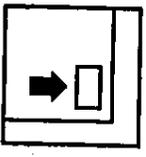


UNITED STATES POSTAL SERVICE®

HOW TO USE:



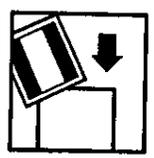
1. COMPLETE ADDRESS LABEL AREA
Type or print required return address and addressee information in customer block (white area) or on label (if provided).



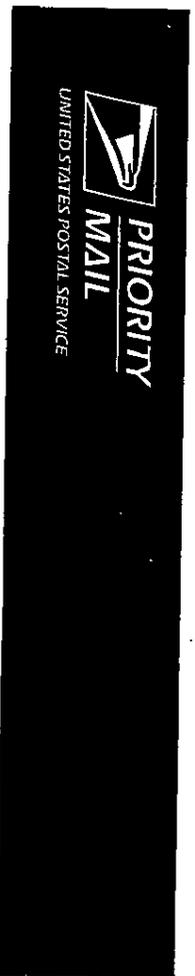
2. PAYMENT METHOD

United States Postal Service®

DELIVERY CONFIRMATION™



0306 0320 0002 2110 2073



From Lautenberg for Senate
196 West State Street
Trenton, NJ 08608

www.usps.com

TO

United States Senate
Office of Public Records
PO Box 5109
Alexandria, VA 22301-0109

Label 228, February 2006

UNITED STATES POSTAL SERVICE

POSTAGE PAID
TRENTON, NJ
08608
OCT 15 2009
AMOUNT \$5.65

UNITED STATES POSTAL SERVICE

UNITED STATES POSTAL SERVICE

www.usps.com

53821702062

NANCY ERICKSON
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL 10-15-09 _____
Postmark **X**
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

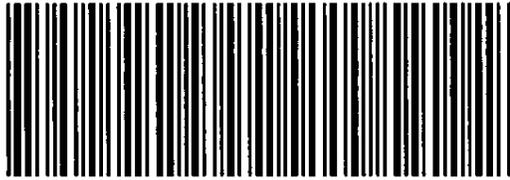
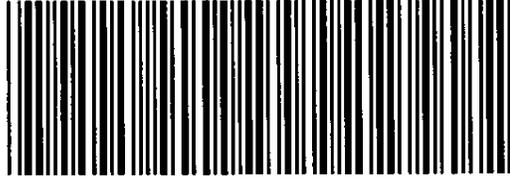
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER RD DATE PREPARED 10-20-09

29020412836



29020412837